## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005266

FILED Jul 26, 2006 Secretary of State

Entity Name: OFFICE OF EDUCATOR FOR HEALTH EDUCATION AND HIS SUCCESSORS, A CORPORATION SOLE

Current Principal Place of Business: New Principal Place of Business:

304 SPRING RUN CIRCLE 2298 WIND JAMMER WAY LONGWOOD, FL 32779 WEST PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

304 SPRING RUN CIRCLE PO BOX 213443

LONGWOOD, FL 32779 WEST PALM BEACH, FL 33421

FEI Number: 55-0804221 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THE OFFICE OF PRESIDING ELDER FOR SOLE RES OURCES DOC. NUMBER F02000001218 1980 N. ATLANTIC AVE., STE. 602 COCOA BEACH, FL 32931 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CEO () Delete
 Title:
 CEO (X) Change () Addition

 Name:
 DYER, DR. DAVID S
 Name:
 DYER, DR. DAVID S

 Address:
 304 SPRING RUN CIRCLE
 Address:
 2298 WIND JAMMER WAY

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 WEST PALM BEACH, FL 33411

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DYER, GENTRY B
 Name:

 Address:
 137 DRESDAN CT
 Address:

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID S. DYER CEO 07/26/2006